

Please type a plus sign (+) inside this box
Under the Paperwork Reduction Act of 19

PTO/SB/05 (4/98)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No. PD-99E082 First Inventor or Application Identifier Pepper Title | Robust Infrared Countermeasure System and Method

FE389640544119

Olly for new f	nonprovisionar applications under 37 C.F.H, § 1.53(b)) Expre	255 Wall Label No. EE30904054405					
	APPLICATION ELEMENTS napter 600 concerning utility patent application contents.	Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC, 20231					
1.	Fee Transmittal Form (e.g., PTO/SB/17) Feb Transmittal Feb Transmittal Feb Transmittal Feb Trans	Mashington, DC 20231 5. Microfiche Computer Program (Appendix) 6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Copy b. Paper Copy (identical to computer copy) c. Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 7. Assignment Papers (cover sheet & document(s)) 8. 37 C.F.R.§3.73(b) Statement (when there is an assignee) Power of Attorney 9. English Translation Document (if applicable) 10. Information Disclosure Statement (IDS)/PTO-1449 11. Preliminary Amendment 12. Return Receipt Postcard (MPEP 503) (Should be specifically Itemized) * Small Entity Statement filed in prior application Statement(s) Statement still proper and desired					
FEES, A SMA	Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY ALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT	(PTO/SB/03-12) Status still proper and desired 14. Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. Other:					
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: Continuation Divisional Continuation-in-part (CIP) of prior application No: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.							
	17. CORRESPONDE	NCE ADDRESS					
Custom	ner Number or Bar Code Label (Insert Customer No. or Atta	or 🗷 Correspondence address below ch bar code label here)					
Name	Robin Loporchio						
Address	Raytheon Company 141 Spring Street						
City	Lexington State	MA Zip Code 02421-7899					
Country	U.S.A. Telephone	781.860.3825 Fax 781.860.3899					
Name (F	Print Type) Leonard A. Alkov	Registration No. (Attorney/Agent) 30,021					
Signatur	· Zenand (1/10/han	Date 04-18-01					

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Approved for use through 10/31/2002 OMB 0651-0032 U.S Patent and Trademark Office, U.S DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to re

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT

(\$) 930.00	30.00
-------------	-------

sportd to a collection of into	imation unless it displays a valid OMB control number
Co	emplete if Known
Application Number	
Filing Date	
First Named Inventor	Pepper
Examiner Name	
Group Art Unit	
Attorney Docket No.	PD-99E082

METHOD OF PAYMENT				FEE CALCULATION (continued)						
1. The Commissioner is hereby authorized to charge indicated fees and great to an experiment to the commissioner in the commissioner is hereby authorized to charge				3. A	DDIT	ΓΙΟΝ	AL F	EES		
Depo	indicated fees and credit any overpayments to- osit					Larg		Sma		
Acco Num			50-0616		Fee	Enti Fee	ty Fee	Enti Fee	•	Pag Daid
Depo			D		Cod	e (\$)	Cod	le (\$)	Fee Description	Fee Paid
Acco Nan			Raytheon Compa	any	105	130	205	65	Surcharge - late filing fee or oath	
		e Any Additio 37 CFR 1.10	onal Fee Required S and 1.17		127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
		ant claims si	mall entity status.		139	130	139	130	Non-English specification	<u> </u>
2.		ment En	losed:		1	2,520	147	2,520	For filing a request for ex parte reexamination	
	Chec		Credit card Mone		112	920*		920*	Requesting publication of SIR prior to Examiner action	
		FEE	CALCULATION		113	1,840	113	1,840	* Requesting publication of SIR after Examiner action	
1. BAS	SIC F	ILING F	EE		115	110	215	55	Extension for reply within first month	
		ty Small E			116	390	216	195	Extension for reply within second month	
	Fee e (\$)	Fee Fe Code (\$		Fee Paid	117	890	217	445	Extension for reply within third month	
101	710	201 35	=	710.00	118	1,390	218	695	Extension for reply within fourth month	
106	320	206 166	Design filing fee	7 10.00	128	1,890	228	945	Extension for reply within fifth month	
107	490	207 24	Plant filing fee		119	310	219	155	Notice of Appeal	
108	710	208 35	Reissue filing fee		120	310	220	155	Filing a brief in support of an appeal	
114	150	214 75	Provisional filing fee		121	270	221	135	Request for oral hearing	
8 5			SUBTOTAL (1)	(\$) 710.00	138	1,510	138	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 710.00			140	110	240	55	Petition to revive - unavoidable			
Z. CAII	KA	LAIN F	F	ee from	141	1,240	241	620	Petition to revive - unintentional	
		20		below Fee Paid		1,240	242	620	Utility issue fee (or reissue)	
Total Clair Independe			20** = 10 X 18 · 3** = X	3.00 = 180.00	143	440		220	Design issue fee	
Claims Multiple D	Denen	ــــــــــــــــــــــــــــــــــــــ	` ^		144	600	244	300	Plant issue fee	
manipio B	Jopon	acm;	L] =[]	122	130		130	Petitions to the Commissioner	
Large E	Entity	Small Ent	itv		123	50	123	50	Processing fee under 37 CFR 1 17(q)	
Fee F	Fee	Fee Fee	Fee Description	ı	126	180	126	180	Submission of Information Disclosure Stmt	
	18	Code (\$) 203 9	Claims in excess of		581	40	581	40	Recording each patent assignment per property (times number of properties)	40.00
		202 40	Independent claims		146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
		204 135 209 40	Multiple dependent ** Reissue indepen- over original pate	dent claims	149	710	249	355	For each additional invention to be examined (37 CFR § 1 129(b))	
110 1	18 :	210 9	** Reissue claims in		179	710	279	355	Request for Continued Examination (RCE)	
			and over original	patent	169	900	169		Request for expedited examination of a design application	
SUBTOTAL (2) (\$)180.00					Other	fee (sp	ecify)		o. a design approaction	
**or number previously paid, if greater; For Reissues, see above					*Redu	ced by	Basic	Filing	Fee Paid SUBTOTAL (3) (\$) 40	.00

SUBMITTED BY Complete (if applicable) Registration No. Name (Print/Type) Leonard A. Alkov 30,021 Telephone 310.647.2577 (Attorney/Agent) Signature Date 04-18-01

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.